

<h1 style="margin: 0;">FEE TRANSMITTAL</h1> <h2 style="margin: 0;">for FY 2003</h2> <p style="font-size: small; margin: 5px 0;">Effective 01/01/2003. Patent fees are subject to annual revision.</p> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27</p>		<p style="text-align: center; font-weight: bold; font-size: small;">Complete if Known</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Application Number</td> <td style="width: 50%;">09/747,054</td> </tr> <tr> <td>Filing Date</td> <td>12/22/2000</td> </tr> <tr> <td>First Named Inventor</td> <td>Bulka et al.</td> </tr> <tr> <td>Examiner Name</td> <td>Mahmoudi, Hassan</td> </tr> <tr> <td>Group / Art Unit</td> <td>2175</td> </tr> <tr> <td>Attorney Docket No.</td> <td>40921/206279 (13C1-003)</td> </tr> </table>		Application Number	09/747,054	Filing Date	12/22/2000	First Named Inventor	Bulka et al.	Examiner Name	Mahmoudi, Hassan	Group / Art Unit	2175	Attorney Docket No.	40921/206279 (13C1-003)
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<p><b>TOTAL AMOUNT OF PAYMENT</b> (\$ ) 110</p>		<div style="font-size: 2em; font-weight: bold; opacity: 0.5; position: relative; top: -50px; left: 50px;">RECEIVED</div> <div style="font-size: 1.5em; font-weight: bold; position: relative; top: 0px; left: 50px;">JUN 18 2003</div> <div style="font-size: 1.2em; font-weight: bold; position: relative; top: 10px; left: 50px;">Technology Center 2100</div>													

METHOD OF PAYMENT (check all that apply)					FEE CALCULATION (continued)																																																																																																																																																																																						
<p><input checked="" type="checkbox"/> Check   <input type="checkbox"/> Credit card   <input type="checkbox"/> Money   <input type="checkbox"/> Other   <input type="checkbox"/> None</p> <p><input type="checkbox"/> Deposit Account:</p> <div style="border: 1px solid black; padding: 5px; margin: 5px 0;"> <p>Deposit Account Number</p> <p>Deposit Account Name</p> </div> <p>The Commissioner is authorized to: (check all that apply)</p> <p><input type="checkbox"/> Charge fee(s) indicated below   <input type="checkbox"/> Credit any overpayments</p> <p><input type="checkbox"/> Charge any additional fee(s) during the pendency of this application</p> <p><input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.</p>					<p><b>3. 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SUBMITTED BY				Complete (if applicable)	
Name (Print/Type)	A. Jose Cortina	Registration No. Attorney/Agent)	29,733	Telephone	919-544-5444
Signature				Date	June 11, 2003

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## TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Application Number	09/747,054
Filing Date	December 22, 2000
First Named Inventor	Bulka et al.
Art Unit	2175
Examiner Name	Mahmoudi, Hassan
Attorney Docket Number	40921/206279

Total Number of Pages in This Submission

20

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JUN 18 2003

Technology Center 2100

(1301-003)

### ENCLOSURES (Check all that apply)

- |  |   |   |
|--|---|---|
| <input checked="" type="checkbox"/> Fee Transmittal Form                     | <input type="checkbox"/> Drawing(s)                                       | <input type="checkbox"/> After Allowance Communication to a Technology Center (TC)      |
| <input checked="" type="checkbox"/> Fee Attached                             | <input type="checkbox"/> Licensing-related Papers                         | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences     |
| <input checked="" type="checkbox"/> Amendment/Reply                          | <input type="checkbox"/> Petition   | <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) |
| <input type="checkbox"/> After Final   | <input type="checkbox"/> Petition to Convert to a Provisional Application | <input type="checkbox"/> Proprietary Information  |
| <input type="checkbox"/> Affidavits/declaration(s)                           | <input type="checkbox"/> Power of Attorney, Revocation                    | <input type="checkbox"/> Status Letter  |
| <input checked="" type="checkbox"/> Extension of Time Request                | <input type="checkbox"/> Change of Correspondence Address                 | <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):         |
| <input type="checkbox"/> Express Abandonment Request                         | <input type="checkbox"/> Terminal Disclaimer                              | Associate Power of Attorney   |
| <input type="checkbox"/> Information Disclosure Statement                    | <input type="checkbox"/> Request for Refund                               | Check for \$110   |
| <input type="checkbox"/> Certified Copy of Priority Document(s)              | <input type="checkbox"/> CD, Number of CD(s) _____                        | Ret.Rec.Postcard  |
| <input type="checkbox"/> Response to Missing Parts/Incomplete Application    |   |   |
| <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 |   |   |

Remarks

### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual	A. Jose Cortina, Reg. No. 29,733
Signature	
Date	June 11, 2003

### CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date: June 11, 2003

Typed or printed	Lynette M. Bailey	Date	June 11, 2003
Signature			

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